12/02/2008 12:54

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC P.O. BOX 98000 ADDRESS (number and street) Check if different than previously **LAFAYETTE** LA 70509 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00335570 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 05 24 2008 06 30 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **TIMOTHY BURKE** Type or Print Name of Treasurer Electronically Filed by TIMOTHY BURKE 12 02 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC ^D 24 D D 0.5 2008 0.6 3 0 2008 Report Covering the Period: From:

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Ž00Š Y Y		4608.44
	(b) Cash on Hand at Begining of Reporting Period	1982.40	
	(c) Total Receipts (from Line 19)	3915.16	26925.90
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5897.56	31534.34
7.	Total Disbursements (from Line 31)	4500.00	30136.78
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1397.56	1397.56
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

2^D4 3^D0 м м 0 5 2008 м м 0 6 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 17355.54 2692.21 (i) Itemized (use Schedule A) 1222.95 6587.63 (ii) Unitemized (iii) TOTAL (add 3915.16 23943.17 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 3915.16 23943.17 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 2982.73 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 3915.16 26925.90 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 3915.16 26925.90 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
2.	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2	Committees	0.00	0.00
٥.	Federal Candidates/Committees and Other Political Committees	4500.00	29882.73
4.	Independent Expenditure	0.00	0.00
<u>5</u> .	(use Schedule E)		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees (c) Other Political Committees		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	254.05
n	Federal Election Activity (2 U.S.C 431(20))		
J.	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) redetal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1	Total Disbursements (add Lines 21(c), 22,		
••	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4500.00	30136.78
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	4500.00	20102 72
	from Line 31)	4500.00	30136.78

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	3915.16	23943.17
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	3915.16	23943.17
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/26 (check only one)			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	INC. EMPLOY	/EE PAC				
Full Name (Last, First, Middle Initial) TERRY ARCENEAUX			Date of Receipt			
	Mailing Address 6209 ASHFORD DR					
City ALEXANDRIA	State LA	Zip Code 71303	Transaction ID: SA11AI.5224 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	71000	48.07			
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PR	n ESIDENT - OPERATIONS	PAYROLL DEDUCTION			
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 639.09				
Full Name (Last, First, Middle Initial) TERRY ARCENEAUX	Date of Receipt					
Mailing Address 6209 ASHFORD DF	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	City State Zip Code ALEXANDRIA LA 71303					
FEC ID number of contributing federal political committee.	C	71303	Amount of Each Receipt this Period 48.08			
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PR	n ESIDENT - OPERATIONS	PAYROLL DEDUCTION			
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 687.17				
Full Name (Last, First, Middle Initial) ERROLL BABINEAUX			Date of Receipt			
Mailing Address 27 OAK PLACE	M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O					
City NEW IBERIA	State LA	Zip Code	Transaction ID: SA11AI.5225			
FEC ID number of contributing federal political committee.	C	70560	Amount of Each Receipt this Period 48.07			
Name of Employer ACADIAN AMBULANCE SERVICE VICE PRI		n ESIDENT - OPERATIONS				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 639.09				
SUBTOTAL of Receipts This Page (optional)		144.22			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 26 (check only one) X	
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	d Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to INC. EMPLOYEE PAC	 	
Full Name (Last, First, Middle Initial) ERROLL BABINEAUX Mailing Address 27 OAK PLACE City NEW IBERIA FEC ID number of contributing federal political committee. Name of Employer	State Zip Code LA 70560 C	Date of Receipt M M D D 2 0 0 8	
Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify) ▼	VICE PRESIDENT - OPERATIONS Aggregate Year-to-Date ▼ 687.17		
Full Name (Last, First, Middle Initial) RAY BIAS Mailing Address 226 S. FIELDSPAN City	Y BIAS ling Address 226 S. FIELDSPAN RD		
SCOTT FEC ID number of contributing federal political committee.	LA 70583	Transaction ID: SA11AI.5228 Amount of Each Receipt this Period 48.07 PAYROLL DEDUCTION	
Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation GOVERMENTAL RELATIONS MANA Aggregate Year-to-Date 639.09		
Full Name (Last, First, Middle Initial) RAY BIAS		Date of Receipt	
Mailing Address 226 S. FIELDSPAN City	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
SCOTT FEC ID number of contributing federal political committee.	LA 70583	Amount of Each Receipt this Period 48.08	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation GOVERMENTAL RELATIONS MANA	PAYROLL DEDUCTION AGER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 687.17	1	

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 8 / 26 (check only one)
TEMPLE RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may ne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, I	NC. EMPLOY	/EE PAC	
Full Name (Last, First, Middle Initial) ANTHONY BRUCH			Date of Receipt
Mailing Address 15 TRACE LOOP			05 30 2008
City	State	Zip Code	Transaction ID: SA11AI.5231
MANDEVILLE	LA	70448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		48.07
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation	n TION COORDINATOR	PAYROLL DEDUCTION
Receipt For:	- '	e Year-to-Date ▼	
Primary General	, .99, ogaic		7
Other (specify) ▼		639.09	
Full Name (Last, First, Middle Initial) ANTHONY BRUCH			Date of Receipt
Mailing Address 15 TRACE LOOP			06 13 2008
City	State	Zip Code	Transaction ID: SA11AI.5232
MANDEVILLE	LA	70448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		48.08
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation EDUCAT	n TION COORDINATOR	PAYROLL DEDUCTION
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 687.17	
Full Name (Last, First, Middle Initial) TIMOTHY BURKE			Date of Receipt
Mailing Address 221 VEROT SCHOOL RD #213			05 30 2008
City	State	Zip Code	Transaction ID: SA11AI.5233
LAFAYETTE	LA	70501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		48.07
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PR	n ESIDENT - FINANCE	PAYROLL DEDUCTION
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼	0 0	639.09	

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 26 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) TIMOTHY BURKE Mailing Address 221 VEROT SCHOO City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State LA C Occupation VICE PR	Zip Code 70501 n ESIDENT - FINANCE Year-to-Date 687.17	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Christopher Cirillo Mailing Address 408 Hazeltine City Lakeway FEC ID number of contributing federal political committee. Name of Employer Acadian Ambulance Services Receipt For: Primary General Other (specify)	State TX C Occupation Aggregate	Zip Code 78734 n • Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Christopher Cirillo Mailing Address 408 Hazeltine City Lakeway FEC ID number of contributing federal political committee. Name of Employer Acadian Ambulance Services Receipt For: Primary General Other (specify)	State TX C Occupation Aggregate	Zip Code 78734 n • Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))		144.23

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, II	son for the purpose of soliciting contributions to solicit contributions from such committee.	
Α.	Full Name (Last, First, Middle Initial) Edward B. Comeaux Mailing Address P.O. Box 946 City Abbeville FEC ID number of contributing federal political committee. Name of Employer Acadian Ambulance Service, Inc Receipt For: Primary General Other (specify)	State Zip Code LA 70511 C Occupation Vice President of Monitoring Service Aggregate Year-to-Date 639.09	Date of Receipt M M
В.	Full Name (Last, First, Middle Initial) Edward B. Comeaux Mailing Address P.O. Box 946 City Abbeville FEC ID number of contributing federal political committee. Name of Employer Acadian Ambulance Service, Inc Receipt For: Primary General Other (specify)	State Zip Code LA 70511 C Occupation Vice President of Monitoring Service Aggregate Year-to-Date 687.17	Date of Receipt M M D D Y Y Y Y Y Y Y Y
c .	Full Name (Last, First, Middle Initial) SCOTT T DOMINIGUE Mailing Address 610 FARMINGTON D City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	R State Zip Code LA 70503 C Occupation Aggregate Year-to-Date ▼ 96.15	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) .	•	192.30

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, IN		n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) SCOTT T DOMINIGUE Mailing Address 610 FARMINGTON DE		Date of Receipt		
City LAFAYETTE	State Zip Code LA 70503	Transaction ID: SA11AI.5284 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	48.08 PAYROLL DEDUCTION		
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 144.23			
Full Name (Last, First, Middle Initial) HOWARD E DUPUIS Mailing Address 149 DEMAS DR	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City LAFAYETTE	State Zip Code LA 70506	Transaction ID: SA11AI.5285 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	96.15		
Name of Employer	Occupation	PAYROLL DEDUCTION		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 96.15			
Full Name (Last, First, Middle Initial) HOWARD E DUPUIS		Date of Receipt		
	Mailing Address 149 DEMAS DR			
City <u>LAFAYETTE</u>	State Zip Code LA 70506	Transaction ID: SA11AI.5287 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	48.08 PAYROLL DEDUCTION		
Name of Employer	Occupation	PATROLL DEDUCTION		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 144.23			
SUBTOTAL of Receipts This Page (optional)	>	192.31		
TOTAL This Period (last page this line number	only)			

ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/26 (check only one)	
Any information copied from such Reports and or for commercial purposes, other than using the such as	Statements may he name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	INC. EMPLOY	EE PAC		
Full Name (Last, First, Middle Initial) DON ELKINS			Date of Receipt	
Mailing Address 100 RENEL RD	05 30 2008			
City BREAUX BRIDGE	Transaction ID: SA11AI.5239 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	70517	48.07	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation		PAYROLL DEDUCTION	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 639.09		
Full Name (Last, First, Middle Initial) DON ELKINS	Date of Receipt			
Mailing Address 100 RENEL RD	0 6 1 3 2 0 0 8			
City	State Zip Code BREAUX BRIDGE LA 70517			
FEC ID number of contributing federal political committee.	C	7.0017	Amount of Each Receipt this Period 48.08	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation		PAYROLL DEDUCTION	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 687.17		
Full Name (Last, First, Middle Initial) DIANE GROH			Date of Receipt	
Mailing Address 201 ACADEMY RD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City LAFAYETTE	State LA	Zip Code 70503	Transaction ID: SA11AI.5241 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		70000	48.07	
Name of Employer ACADIAN AMBULANCE SERVICE Occupation VICE PRESIDENT - INSURANCE			PAYROLL DEDUCTION	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 639.09		
SUBTOTAL of Receipts This Page (optional)			144.22	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 26 (check only one) X
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, INC	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) DIANE GROH Mailing Address 201 ACADEMY RD City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	-	ESIDENT - INSURANCE • Year-to-Date ▼ 687.17	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Б.	Full Name (Last, First, Middle Initial) CLAY HENRY Mailing Address 310 WALLINGSFORD City YOUNGSVILLE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	1	Zip Code 70592 n IESIDENT - OPERATIONS e Year-to-Date ▼ 639.09	Date of Receipt M
	Full Name (Last, First, Middle Initial) CLAY HENRY Mailing Address 310 WALLINGSFORD City YOUNGSVILLE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	1	Zip Code 70592 n RESIDENT - OPERATIONS e Year-to-Date ▼ 687.17	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			144.23

SCHEDULE A (FEC Form 3X)

ITE	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Ptatamanta ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 26 (check only one) X 11a
or fo	r commercial purposes, other than using the IAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, IN	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4. <u>G</u>	ull Name (Last, First, Middle Initial) GREG HILL Mailing Address 205 ROCKY MOUND	DR		Date of Receipt 0 5 3 0 2 0 0 8
	ity	State	Zip Code	Transaction ID: SA11AI.5245
F	AFAYETTE EC ID number of contributing ederal political committee.	C	70506	Amount of Each Receipt this Period 48.07
<u>11</u>	lame of Employer ACADIAN AMBULANCE SERVICE, NC Receipt For: Primary General Other (specify)		RESIDENT FINANCE e Year-to-Date 638.97	PAYROLL DEDUCTION
3. <u>G</u>	ull Name (Last, First, Middle Initial) GREG HILL Mailing Address 205 ROCKY MOUND	Date of Receipt 0 6 1 3 2 0 0 8		
C	ity	Transaction ID: SA11AI.5246		
L	AFAYETTE	LA	70506	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		48.08 PAYROLL DEDUCTION
<u>11</u>	lame of Employer (CADIAN AMBULANCE SERVICE, NC leceipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 687.05	TATIOLE BEDOON
. <u>F</u>	ull Name (Last, First, Middle Initial) ROSS JUDICE Mailing Address 111 GIRARD PK, DRI	Date of Receipt		
- IV	Mailing Address 111 GIRARD PK. DRI	VE #25		05 30 2008
	ity .AFAYETTE	State LA	Zip Code 70503	Transaction ID: SA11AI.5247 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	70303	48.07
N A	lame of Employer CADIAN AMBULANCE SERVICE	PAYROLL DEDUCTION		
R	leceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 639.09	
SUI	BTOTAL of Receipts This Page (optional) .	1		144.22

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) ach category of the illed Summary Page	FOR LINE NUMBER: PAGE 15 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, I	ne name and address of	any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROSS JUDICE Mailing Address 111 GIRARD PK. DF City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip		Date of Receipt M M J D D J 2008 Transaction ID: SA11AI.5248 Amount of Each Receipt this Period 48.08 PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) DAVID KELLY Mailing Address 2060 CHERRYDALE City BATON ROUGE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip		Date of Receipt M M
Full Name (Last, First, Middle Initial) DAVID KELLY Mailing Address 2060 CHERRYDALE City BATON ROUGE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip		Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)			144.23

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate scl for each category Detailed Summa	of the Check only one)
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, I	e name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) STEVEN KUIPER	10. LIM 201221710	Date of Receipt
	Mailing Address 408 IDLEWILD DR City HOUMA	State Zip Code LA 70364	Transaction ID: SA11AI.5252 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	PAYROLL DEDUCTION
	Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify) ▼	1	
	Full Name (Last, First, Middle Initial) STEVEN KUIPER Mailing Address 408 IDLEWILD DR		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HOUMA	State Zip Code LA 70364	Transaction ID: SA11AI.5253 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	48.08
	Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPER	PAYROLL DEDUCTION RATION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	687.17
	Full Name (Last, First, Middle Initial) DANNY LENNIE	I	Date of Receipt
	Mailing Address 12718 E. SHEATON		05 7 30 7 2008
	City BATON ROUGE	State Zip Code LA 70815	Transaction ID: SA11AI.5255 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	48.07
	Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPER	PAYROLL DEDUCTION RATION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	639.09
	SUBTOTAL of Receipts This Page (optional)		144.22

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 26 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	the name and add	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DANNY LENNIE Mailing Address 12718 E. SHEATON	l		Date of Receipt
City BATON ROUGE	State LA	Zip Code 70815	Transaction ID: SA11AI.5256 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation		48.08 PAYROLL DEDUCTION
Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify) ▼	VICE PRE	SIDENT - OPERATION Year-to-Date ▼ 687.17	
Full Name (Last, First, Middle Initial) JOSEPH LIGHTFOOT Mailing Address 215 CRESTHILL DF	RIVE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.5257
YOUNGSVILLE FEC ID number of contributing federal political committee.	C	70592	Amount of Each Receipt this Period 48.07
Name of Employer ACADIAN AMBULANCE SERVICE		SIDENT - HUMAN RESOL	PAYROLL DEDUCTION JRCES
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 639.09	
Full Name (Last, First, Middle Initial) JOSEPH LIGHTFOOT			Date of Receipt
Mailing Address 215 CRESTHILL DF	RIVE		06 13 7 2008
City YOUNGSVILLE	State LA	Zip Code 70592	Transaction ID: SA11AI.5258 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70352	48.08
Name of Employer ACADIAN AMBULANCE SERVICE	- '	ESIDENT - HUMAN RESOL	PAYROLL DEDUCTION JRCES
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 687.17	
SUBTOTAL of Receipts This Page (optional)		144.23

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 26 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE,	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statement and address of any political committee to INC. EMPLOYEE PAC	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ED MURY Mailing Address 3500 E SIMCOE #7 City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For:	State Zip Code LA 70501 C Occupation PRESIDENT - AIS Aggregate Year-to-Date	Date of Receipt M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ED MURY Mailing Address 3500 E SIMCOE #7	639.09	Date of Receipt
City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE	State Zip Code LA 70501 C Occupation	Transaction ID: SA11AI.5262 Amount of Each Receipt this Period 48.08 PAYROLL DEDUCTION
Receipt For: Primary General Other (specify) ▼	PRESIDENT - AIS Aggregate Year-to-Date ▼ 687.17	
Full Name (Last, First, Middle Initial) ALLYSON F. PHARR Mailing Address 101 BONNER DR City LAFAYETTE FEC ID number of contributing	State Zip Code LA 70508	Date of Receipt M M D D Y Y Y Y Y Y Y Y
federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE, INC Receipt For: Primary General Other (specify) ▼	Occupation VICE PRESIDENT LEGAL & GOV. A Aggregate Year-to-Date 639.09	PAYROLL DEDUCTION FFAIRS
SUBTOTAL of Receipts This Page (optional)	<u> </u>	144.22

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate for each categ Detailed Sumi	ory of the
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or use name and address of any politic	sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, II	•	
Full Name (Last, First, Middle Initial) ALLYSON F. PHARR		Date of Receipt
Mailing Address 101 BONNER DR		0 6 1 3 2 0 0 8
City LAFAYETTE	State Zip Code LA 70508	Transaction ID: SA11AI.5264 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	48.08
Name of Employer ACADIAN AMBULANCE SERVICE, INC	Occupation VICE PRESIDENT LEG	PAYROLL DEDUCTION AL & GOV. AFFAIRS
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	687.17
Full Name (Last, First, Middle Initial) TYRON PICARD	1	Date of Receipt
Mailing Address 2005 W. ST. MARY		05 30 Y Y Y Y Y Y
City LAFAYETTE	State Zip Code LA 70506	Transaction ID: SA11AI.5265 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.07
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation EXECUTIVE VICE PRE	PAYROLL DEDUCTION SIDENT
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	639.09
Full Name (Last, First, Middle Initial) TYRON PICARD		Date of Receipt
Mailing Address 2005 W. ST. MARY		0 6 1 3 2 0 0 8
City LAFAYETTE	State Zip Code LA 70506	Transaction ID: SA11AI.5266 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.08
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation EXECUTIVE VICE PRE	PAYROLL DEDUCTION SIDENT
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	687.17
SUBTOTAL of Receipts This Page (optional) .	1	144.23

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, IN	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) DAVID PIERCE Mailing Address 327 WORTH AVE City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)		Zip Code 70508 n ENT/COO Year-to-Date ▼ 639.09	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- B.	Full Name (Last, First, Middle Initial) DAVID PIERCE Mailing Address 327 WORTH AVE City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)		Zip Code 70508 n ENT/COO Year-to-Date ▼ 687.17	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- C.	Full Name (Last, First, Middle Initial) EARL ROMERO, Jr. Mailing Address 104 VAN DYKE CT City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)		Zip Code 70503 1 ESIDENT - OPERATIONS Year-to-Date 639.09	Date of Receipt M
	SUBTOTAL of Receipts This Page (optional)			144.22

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 26 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, IN	name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) EARL ROMERO, Jr. Mailing Address 104 VAN DYKE CT City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70503 C Occupation VICE PRESIDENT - OPERATIONS Aggregate Year-to-Date 687.17	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) W KEITH SIMON Mailing Address 465 BROUSSARD ST City BREAUX BRIDGE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70517 C Occupation VICE PRESIDENT - PUBLIC RELAT Aggregate Year-to-Date 639.09	Date of Receipt M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) W KEITH SIMON Mailing Address 465 BROUSSARD ST City BREAUX BRIDGE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70517 C Occupation VICE PRESIDENT - PUBLIC RELAT Aggregate Year-to-Date 687.17	Date of Receipt M M M D D D D D D D D D D D D D D D D
SUBTOTAL of Receipts This Page (optional)		144.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, I	Statements may not be sold or used by any persone name and address of any political committee to	
Full Name (Last, First, Middle Initial) WILLIAM VIDACOVICH, Jr. Mailing Address 116 CANADA ST City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70506 C Occupation VICE PRESIDENT - MNT. Aggregate Year-to-Date 639.09	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: SA11AI.5273 Amount of Each Receipt this Period 48.07 PAYROLL DEDUCTION
Full Name (Last, First, Middle Initial) WILLIAM VIDACOVICH, Jr. Mailing Address 116 CANADA ST City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70506 C Occupation VICE PRESIDENT - MNT. Aggregate Year-to-Date 687.17	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) JOHN ZUSCHLAG Mailing Address 110 RUE PAPILLON City BROUSSARD FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State Zip Code LA 70518 C Occupation SR. VICE PRESIDENT Aggregate Year-to-Date 639.09	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		144.22

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 26 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, IN	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ . .	Full Name (Last, First, Middle Initial) JOHN ZUSCHLAG Mailing Address 110 RUE PAPILLON City BROUSSARD FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)		Zip Code 70518 n E PRESIDENT e Year-to-Date ▼ 687.17	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Full Name (Last, First, Middle Initial) RICHARD ZUSCHLAG Mailing Address 108 ASTORIA LOOP City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	State LA C Occupatio CHAIRM Aggregate		Date of Receipt M M D D Y Y Y Y Y Y Y Y
<u>-</u>	Full Name (Last, First, Middle Initial) RICHARD ZUSCHLAG Mailing Address 108 ASTORIA LOOP City LAFAYETTE FEC ID number of contributing federal political committee. Name of Employer ACADIAN AMBULANCE SERVICE Receipt For: Primary General Other (specify)	+ +	Zip Code 70508 n AN/CEO e Year-to-Date ▼ 687.17	Date of Receipt M M M / D D M 2008 Transaction ID: SA11AI.5277 Amount of Each Receipt this Period 48.08 PAYROLL DEDUCTION
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IT EMIZED DISBURSEMENTS Total accordance 21b 22 23 24 25 29 28 28 28 28 28 28 28	SCHEDULE B (FEC Form	Use separate schedule		26
nor for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC Full Name (Last, First, Middle Initial) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PA- (Internation Internation Inter	ITEMIZED DISBURSEMEN	for each category of the Detailed Summary Page	e 21b 22 X 23 24 25	
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC Full Name (Last, First, Middle Initial) AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PA-C) Mailing Address 8201 Greensboro Drive Suite 300 City McLean VA 22102 Purpose of Disbursement CONTRIBUTIONS Candidate Name AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PA-C) Office Sought: Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City SHREVEPORT LA 71104 Purpose of Disbursement CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City SHREVEPORT LA 71104 Purpose of Disbursement CARMOUCHE FOR CONGRESS INC Mailing Address President Shade President Confice Sought: X House Senate President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City NEW ROADS Mailing Address President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City NEW ROADS Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Date of Disbursement				
MERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PA- Mailing Address 8201 Greensboro Drive Suite 300 City State Zip Code WA 22102 Purpose of Disbursement CONTRIBUTIONS Candidate Name AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AM- Type) Office Sought: House President State: District: Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City State Zip Code SHREVEPORT LA 71104 Purpose of Disbursement Candidate Name CARMOUCHE FOR CONGRESS INC Office Sought: Y house Senate President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code X Primary General Other (specify) ▼ Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement Other (specify) ▼ Transaction ID: SB23.5219 Date of Disbursement this Pe Amount of Each Disbursement Office Sought: X House Senate President Transaction ID: SB23.5218 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Amount of Each Disbursement this Pe Transaction ID: SB23.5218 Date of Disbursement this Pe Transaction ID: SB23.5219 Date of Disbursement this Pe Transaction ID: SB23.5218 Dat	NAME OF COMMITTEE (In Full)			
Mailing Address 8201 Greensboro Drive Suite 300 City Suite 300 City State Zip Code McLean VA 22102 Purpose of Disbursement CONTRIBUTIONS Candidate Name CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City Share President District: Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Cardidate Name CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City Senate President Disbursement For: 2008 X Primary General President Disbursement For: 2008 Amount of Each Disbursement This Pestate Transaction ID: SB23.5218 Date of Disbursement Primary General President District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code LA 70760 City Gardenov Type Condensed Transaction ID: SB23.5218 Date of Disbursement Primary General Cardenov Type C		OCIATION FEDERAL PAC (AKA	A AMBU-PA- Date of Disbursement	
McLean VA 22102 Purpose of Disbursement CONTRIBUTIONS Candidate Name AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AM. Type Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City State Zip Code SHREVEPORT LA 71104 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name CARMOUCHE FOR CONGRESS INC Office Sought: X House Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Office Sought: X House Senate President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code LA 70760 Purpose of Disbursement Poilt Category' Type Transaction ID: SB23.5218 Date of Disbursement Increase Senate President State Zip Code LA 70760 Amount of Each Disbursement Increase Senate President State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each Disbursement Increase State Zip Code LA 70760 Amount of Each D		oro Drive	06 0 0 1 7 2 0 0 8	Y
CONTRIBUTIONS Candidate Name AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AM Type Office Sought: House				-
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AM-Type BU PAC) Office Sought:	CONTRIBUTIONS		011)
Senate President State: District: Full Name (Last, First, Middle Initial) CARMOUCHE FOR CONGRESS INC Mailing Address 912 KINGS HIGHWAY City State Zip Code LA 71104 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name CARMOUCHE FOR CONGRESS INC Office Sought: X House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code Amount of Each Disbursement this Pestate LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City NEW ROADS LA 70760 Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Disbursement For: 2008 City NEW ROADS LA 70760 Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Amount of Each Disbursement this Pestate President Tor: 2008 Amount of Each Disbursement Tor: 2008 Amount of Each Disbursement Tor: 2008 Amount of Each Disbursement Tor: 2008 Caregory' Type Other (specify) ▼ Other (specify) ▼	AMERICAN AMBULANCE ASSO	<u>'</u>	4 4 4	
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Mailing Address 912 KINGS HIGHWAY City State Zip Code SHREVEPORT LA 71104 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name CARMOUCHE FOR CONGRESS INC Office Sought: X House Senate President President Political Contribution City State Zip Code Total Category/ Type Disbursement For: 2008 Senate President President President Political Contribution City State Zip Code LA 70760 Transaction ID: SB23.5218 Date of Disbursement Total Date of Disbursement Total Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House LA 70760 Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House LA 70760 Disbursement For: 2008 Amount of Each Disbursement this Pelacy Type Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House La 70760 Disbursement For: 2008 Amount of Each Disbursement Total Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President President Other (specify) Other (specify	Full Name (Last, First, Middle Initial)	S INC		
SHREVEPORT Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name CARMOUCHE FOR CONGRESS INC Office Sought: X House Senate President Political Category/ Senate President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City NEW ROADS Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate Zip Code NEW ROADS Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Disbursement For: 2008 X Primary General Other (specify) ▼ Amount of Each Disbursement this Penal Category/ Type Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Other (specify) ▼				Y
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Senate President State: LA District: 04 Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City NEW ROADS Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X Primary Charaction ID: SB23.5218 Date of Disbursement		S INC		
Full Name (Last, First, Middle Initial) CAZAYOUX FOR CONGRESS Mailing Address P.O. BOX 156 City State Zip Code NEW ROADS LA 70760 Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Disbursement For: 2008 X Primary General Other (specify) Other (specify)	Senate President	X Primary Gener	al	
Mailing Address P.O. BOX 156 City State Zip Code NEW ROADS LA 70760 Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Disbursement For: 2008 Senate President Other (specify) ▼	Full Name (Last, First, Middle Initial)			
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Purpose of Disbursement Political Contribution Candidate Name CAZAYOUX FOR CONGRESS Office Sought: X House Senate President Disbursement For: Senate President Other (specify) Type			Amount of Each Disbursement this F	erio
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Senate X Primary General President Other (specify) ▼	Candidate Name		Category/	
	Senate	X Primary Gener	al	
State. LA District. 00	State: LA District: 06	Strict (openity)		

A.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)	SE 25 / 26
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 27 28a 28b 28c	25 26 29 30b
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name		, , ,	
NAME OF COMMITTEE (In Full) ACADIAN AMBULANCE SERVICE, INC. E	MPLOYEE PAC		
Full Name (Last, First, Middle Initial) SCALISE FOR CONGRESS 08 Mailing Address 3100 Ridgelake Suite 301		Transaction ID: SB23.5 Date of Disbursement M 6 M / D 2 D / Y	292 Ž 0 Ŏ 8 ^Y
City	State Zip Code _A 70002	Amount of Each Disbursem	ent this Period
Candidate Name SCALISE FOR CONGRESS 08	Ca	ategory/ Type	
Office Sought: X House Senate President State: LA District: 01	nent For: 2008 Primary X General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)		4500.00

Image# 28993317184	
Form/Schedule: F3XA Transaction ID:	Amendment is due to clerical error on election type for Don Cazayoux.
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